		DADTD	PPP(S)	TRANSMITTAL		
SEP	his form, Deether with 7 2004	h applicable fe	e(s), to: M	Mail Stop ISS Commissioner P.O. Box 1450 Alexandria, Vi (32) (703) 746-4000	for Patents irginia 22313-1450	is should be completed where ent correspondence address as eparate "FEE ADDRESS" for
CURRENT CORRESPONDENCE  23280 75 DAVIDSON, DA 485 SEVENTH AV NEW YORK, NY	E ADDRESS (Note: Use Block 1 for 08/30/2004 VIDSON & KAPPE VENUE, 14TH FLOOF 10018	any change of address)	specifying a	Note: A certificate Fee(s) Transmittal. papers. Each additi have its own certifi  I hereby certify tha States Postal Servi addressed to the M	of mailing can only be used This certificate cannot be used onal paper, such as an assign cate of mailing or transmission Certificate of Mailing or Transmission	I for domestic mailings of the d for any other accompanying ment or formal drawing, must n.  ansmission being deposited with the United first class mail in an envelope ess above. or being facsimile
08/2004 RMEBRAH1 0000 FC:1501 FC:1504 FC:8001	0148 10663017 1330.00 OP 300.00 OP 30.00 OP			Jan Decker  Jan Hule  9/2/2004		(Depositor's name) (Signature) (Date)
APPLICATION NO.	FILING DATE	F	IRST NAMED		ATTORNEY DOCKET NO	. CONFIRMATION NO.
10/663,017 TITLE OF INVENTION: D	09/15/2003 OUBLE-PIVOT HINGE FO	OR MOTOR VEHIO	Adrian I	Nania	529.1002CON	2555
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	11/30/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS		
MAH, CHUCK Y		3676		016-334000	<del></del>	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is  2 Kappel, LLC			

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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(A) NAME OF ASSIGNEE

Number is required.

09/

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Edscha Roof SystemsInc'.

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Pontiac, MΙ

☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.  $\square$  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0552 (enclose an extra copy of this form). Advance Order - # of Copies \_\_\_\_10 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Eee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Registration No. 36,561 Cary S. Kappel Typed or printed name

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